PATENT APPLICATION FEE DETERMINATION RECORD													
Effective October 1, 2003 /6/1/2493													13
	ا د	AS FILED (Colum		SMALL TYPE	ENTATY	OF		R THAN ENTITY					
ľ	OTAL CLAIMS	5		37	37 .		·		RATE	FEE	ר ר	RATE	FEE -
FOR .				NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F	€E 385.0	J <sub>OB</sub>	BASIC FE	
TOTAL CHARGEABLE CLAIMS				37 n	ninus 20≖	· 17			XS 9=		OR	V2:0	306
ž.	DEPENDENT C	LAIMS	•	8	minus 3 =				X43=	<del>                                     </del>	OR	Voc	1
M	ULTIPLE DEPE	NDEN'	T CLAIM	PRESENT					-145-	+	7	-	1
• If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR													1076
OTHER THAN													
<u>U</u>	HUNI		SMALI	. ENTITY	OR		ENTITY						
AMENDMENT A	• ·	RE	LAIMS MAINING VETER MOMENT		HIGHI NUME PREVIO PAID.E	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE
<b>3</b>	Total	. 3	37	Minus	-3	7	.0		XS 9=	1	OR	XS18=	7
	Independent	<u> </u>	2	Minus		3_	.0	l	X43=	<del>                                     </del>	OR	X86•	<del>     </del>
_	FIRST PRESE	NTATI	ON OF M	ULTIPLE DE	PENDENT	CLAIM		<b> </b>	+145=	<del>                                     </del>	<b> </b>	.200	
_	1 1	•	•	L	ATOT		OR	+290=					
4	12115	(Co	tumn 1)		(Colum	n 2)	(Column 3)	A	DOIT. FEE		JOR	ADDIT. FEE	
AMENDMENT B		RET.	LIMS LINING FTER NOMENT		HIĞHE NUMB PREVIOI PAID F	SY ER JSLY	PRESENT EXTRA	,[	RATE	ADDI- TIONAL FEE	]	RATE	ADDI- TIONAL
	Total	. 12	37	Minus '	- 3	7	. /	r	XS 9=	755	OR	XS18=/	FEE
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM													
	10/6	10		-				L	145= TOTAL	<del></del>	OR	+290=	
ADDIT/FEE ADDIT. FEE													
,	` /	Či,	ALIS CHARLE		(Column HEGHE! NUMBE	51	(Column 3)		<u> </u>	ADDI-	1		ADDI-
	NIR	AF	TER TUMENT		PREVIOU PAID FO	SLY	PRESENT EXTRA	Ľ	RATE	TIONAL		RATE	TIONAL
:	Total	• ]	<u> </u>	Minus	-37		· O	,	CS 9=		OR	X\$18=	
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_1		- K3	COLUMN TO THE		C.IDEVI (		لياط	Ι.	145=		OR	+290=	1
. tt - tt	the entry in column the "Highest Num	Ti than th	e entry in color	_	YOTAL			TOTAL	42				
	the "Highest Numb he "Highest Numb	Dei P	NG JELV PA	id For IN THE	S SPACE IN L	es than	1		FT. FEE			DOIT. FEEL	
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Passed and Tracement Office, U.S. DEPARTMENT OF COMMERCE

FORM PTO-673 (Rev 10:03)